



**APPLICATION FOR ACCESS TO PUBLIC RECORD  
SUBMISSION FORM**  
MARYLAND STATE POLICE  
LICENSING DIVISION  
1111 REISTERSTOWN ROAD  
PIKESVILLE, MARYLAND 21208 – 3899  
PHONE: 410-653-4500



PURSUANT TO THE ANNOTATED CODE OF MARYLAND, GENERAL PROVISIONS TITLE 4 PUBLIC INFORMATION ACT, SUBTITLE 202, A PERSON OR GOVERNMENTAL UNIT THAT WISHES TO INSPECT A PUBLIC RECORD SHALL SUBMIT A WRITTEN APPLICATION TO THE CUSTODIAN. THE CUSTODIAN SHALL GRANT OR DENY THE APPLICATION PROMPTLY, BUT NOT TO EXCEED 30 DAYS AFTER RECEIVING THE APPLICATION.

DATE:

**SECTION I: YOUR CONTACT INFORMATION (REQUESTOR)**

FIRST NAME: ..... LAST NAME: ..... MIDDLE NAME: .....  
STREET ADDRESS: ..... CITY: ..... STATE: ..... ZIP CODE: .....  
HOME PHONE: ..... CELL PHONE: ..... EMAIL: .....

**SECTION II: PLEASE SELECT APPROPRIATE REGULATED ENTITY**

- |                                                       |                                                      |                                                        |                                |
|-------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------|--------------------------------|
| <input type="checkbox"/> SECURITY SYSTEMS AGENCY      | <input type="checkbox"/> SECURITY SYSTEMS TECHNICIAN | <input type="checkbox"/> SECURITY GUARD AGENCY         | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> SECURITY GUARD               | <input type="checkbox"/> SPECIAL POLICE OFFICER      | <input type="checkbox"/> RAILROAD POLICE OFFICER       |                                |
| <input type="checkbox"/> PRIVATE DETECTIVE AGENCY     | <input type="checkbox"/> PRIVATE DETECTIVE           | <input type="checkbox"/> FIREARMS DEALER               |                                |
| <input type="checkbox"/> QUALIFIED HANDGUN INSTRUCTOR | <input type="checkbox"/> FIREARMS DEALER             | <input type="checkbox"/> WEAR AND CARRY HANDGUN PERMIT |                                |

PURSUANT TO THE ANNOTATED CODE OF MARYLAND, TITLE 29 DEPARTMENT OF STATE POLICE, SUBTITLE 01 OFFICE OF THE SECRETARY, CHAPTER 02 PUBLIC INFORMATION REQUESTS, SUBSECTION 13 FEES

COPIES: THE FEE FOR EACH COPY IS 75 CENTS PER PAGE IF REPRODUCTION IS MADE BY A PHOTOCOPYING MACHINE WITHIN THE DEPARTMENT. THE SECRETARY OR THE SECRETARY'S DESIGNEE MAY CHARGE A REASONABLE FEE FOR THE REPRODUCTION OF PHOTOGRAPHS. IF RECORDS CANNOT BE ADEQUATELY REPRODUCED BY PHOTOCOPYING (FOR EXAMPLE, PUNCH CARDS, MAGNETIC TAPES, BLUEPRINTS, AND MICROFILM), THE FEE FOR COPIES IS BASED ON THE ACTUAL COST OF REPRODUCTION.

CERTIFICATION OF COPIES: IF A PERSON REQUESTS THAT A COPY OF A RECORD BE CERTIFIED AS A TRUE COPY, AN ADDITIONAL FEE OF 75 CENTS PER PAGE SHALL BE CHARGED.

MINIMUM FEE CHARGED: A CHARGE IS NOT MADE IF THE TOTAL AMOUNT OF THE FEE WOULD BE \$1.00 OR LESS.

IF YOUR REQUEST IS DENIED, YOU WILL BE NOTIFIED WITHIN THIRTY WORKING DAYS AND YOU HAVE THE RIGHT TO PETITION THE CIRCUIT COURT IN THE JURISDICTION OF YOUR RESIDENCE OR BUSINESS LOCATION, OR WHERE THE RECORDS ARE SITUATED TO REVIEW THE MATTER AND RULE ON SUCH DENIAL.

YOUR SIGNATURE: ..... DATE: .....

PLEASE USE THIS SPACE BELOW TO FURTHER EXPLAIN YOUR REQUEST OR TYPE OF INFORMATION YOU ARE SEEKING. YOU MAY ATTACH ADDITIONAL SHEETS IF NECESSARY.

PLEASE COMPLETE THIS FORM AND EMAIL IT TO  
[msp.lic\\_command@maryland.gov](mailto:msp.lic_command@maryland.gov)

DO NOT WRITE IN THIS SPACE. RESERVED FOR THE LICENSING DIVISION

- ☐ APPROVED FEE \$ .....
- ☐ APPROVED – RECORDS ARE IN USE OR STORAGE AND WILL BE AVAILABLE: DATE .....
- ☐ DENIED – REASON FOR DENIAL .....

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DATE RECEIVED: .....  
UNIT: .....  
PUBLIC RECORD NO: .....  
DATE REVIEWED: .....  
REVIEWER NAME: .....

